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VIA ECFS

Marlene H. Dortch Secretary Federal Communications Commission 445 12th Street, SW, Portals Washington, D.C. 20554

Re: WC Docket No. 02-60, Rural Health Care Support Mechanism, Ex Parte Communication

Dear Ms. Dortch:

In a recent meeting, Iowa Health System ("IHS") discussed the benefits of its pending application for support under the Commission's Rural Health Care Pilot Program ("Pilot Program"). In particular, IHS noted during the meeting that its application was unique in that it requests funding only for the access, or "last mile" facilities of its already operational dedicated health care backbone network. As a result, the application is completely "scalable" insofar as IHS could receive a portion of its initial grant request and still achieve the objectives identified in the application and provide improved access to tele-medicine and tele-health to rural citizens of Iowa.

In its Application, IHS identified 78 hospitals, clinics and other medical facilities that were within a mile of the IHS backbone network and were potential connection points for the IHS network. In the Application and again in IHS's August 7, 2007 ex parte letter, IHS noted that, due to the timing of the Commission's deadline for the filing of the Application, there was not sufficient time to receive full commitments from all of the identified connections at the time the Application was due. As of today, IHS has received 30 firm commitments from different facilities, with two-thirds of these commitments coming from rural providers.

These 30 commitments represent 3,682 beds. A list of these 30 firmly committed facilities is attached to this letter. To fund the access connections for these 30 facilities, IHS projects that these connections will require a grant under the Pilot Program of \$3,603,135. As a reminder, the Application requested \$7,802,732 to provide access to all 78 of the originally identified facilities.¹

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Generally, decreasing the number of connections to a network will typically increase the marginal costs of the remaining connections, although the specific geographic location of each connection (i.e., proximity to existing backbone network) also plays a significant role.

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As noted in the Application, IHS intends to facilitate the access to the network using the more cost effective approach of either newly acquired or built fiber or leased circuits. The attachment also identifies whether the IHS believes owned or leased fiber is the most cost-effective approach. As stated in the August 7 letter, IHS is committed to complying the Commission's competitive bid requirements, and thus the actual costs for connecting the these facilities to the network may be less when telecom entities have the opportunity to competitively bid to provide the access circuits.

IHS continues to believe that the full amount of its requested support will provide the greatest benefit to Iowans. IHS realizes, however, that the Commission is considering numerous applications and may not be able to fully fund all requests. Because the IHS project involves increasing access to an existing operational network, the project can still provide the benefits of the program to many Iowans even if the Commission cannot provide full funding.

Respectfully submitted,

Douglas D. Orvis II

cc: Jeremy Marcus

Elizabeth Verlanoti Jennifer Prime Sabra Roesner

Enclosure

Committed Healthcare Facilities

Number	Hospital	City	Connection
1	Allen Hospital	Waterloo	Fiber
2	Iowa Lutheran Hospital	Des Moines	Fiber
3	Iowa Methodist Medical Center	Des Moines	Fiber
4	Saint Luke's Hospital	Cedar Rapids	Fiber
5	Saint Luke's Regional Medical Center	Sioux City	Fiber
6	The Finley Hospital	Dubuque	Fiber
7	Trinity Regional Medical Center	Moline	Fiber
8	Trinity Terrace Park Campus	Fort Dodge	Fiber
9	Trinity West Campus	Bettendorf	Fiber
10	Trinity 7th Street Campus	Rock Island	Fiber
11	Broadlawns Medical Center	Des Moines	Fiber
12	Buena Vista Regional Medical Center	Storm Lake	Leased
13	Cass County Memorial Hospital	Atlantic	Fiber
14	Clarke County Hospital	Osceola	Leased
15	Community Memorial Hospital - Sumner	Sumner	Leased
16	Dallas County Hospital	Perry	Fiber
17	Greater Regional Medical Center	Creston	Leased
18	Greene County Medical Center	Jefferson	Leased
19	Grundy County Memorial Hospital	Grundy Center	Fiber
20	Guthrie County Hospital	Guthrie Center	Fiber
21	Guttenberg Municipal Hospital	Guttenberg	Leased
22	Henry County Health Center	Mount Pleasant	Fiber
23	Humboldt County Memorial Hospital	Humboldt	Fiber
24	Jackson County Public Hospital	Maquoketa	Fiber
25	Jones Regional Medical Center	Anamosa	Fiber
26	Loring Hospital	Sac City	Leased
27	Marshalltown Medical & Surgical Center	Marshalltown	Fiber
28	Mary Greeley Medical Center	Ames	Fiber
29	Ottumwa Regional Health Center	Ottumwa	Fiber
30	Pocahontas Community Hospital	Pocahontas	Leased